

OUTPATIENT SUBSTANCE ABUSE TREATMENT Level I

Definition: Outpatient substance abuse treatment is provided in a licensed Outpatient facility which provides regularly scheduled individual, group and/or licensed family counseling for less than nine (9) hours per week. Services may be provided to patients discharged from a more intensive level of care, but are not necessarily limited to this. Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services. This care approximates ASAM PPC-2R Level 1.

Counseling / Therapy Services:

- Individual: in a full session, which includes face to face and documentation for one (1) hour
- Individual: in a half-session, which includes face to face and documentation for thirty (30) minutes.
- Group: minimum sixty (60) minutes
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions
- Family education and information sessions as clinically indicated

INTENSIVE OUTPATIENT SUBSTANCE ABUSE TREATMENT Level II.I

Definition: Intensive Outpatient (IOP) Substance abuse treatment is provided in a licensed IOP facility which provides a broad range of highly clinically intensive clinical interventions. Services are provided in a structured environment for no less than nine (9) hours per week. Request for more than twelve (12) hours per week of services must be pre-approved by initiative case manager or DAS staff. **A minimum of three (3) hours of treatment services must be provided on each billable day to include one individual session per week.** IOP treatment will generally include intensive, moderate and step down components. Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Substance Abuse Counseling Services. This care approximates ASAM PPC-2 Level II.I care.

Counseling / Therapy Services:

- Individual: 1 hour/week minimum
- Group: 6 hours/week minimum
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions: 2 hours/week minimum
- Family education and information sessions as clinically indicated

PARTIAL CARE SUBSTANCE ABUSE TREATMENT Level II.5

Definition: Partial Care substance abuse treatment is provided in a licensed Partial Care facility which provides a broad range of highly clinically intensive interventions. Services are provided in a structured environment for no less than 20 hours per week. **A minimum of four (4) hours of treatment services must be provided on each billable day to include one individual session per week.** Lunch is not a billable hour. Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Substance Abuse Counseling Services. Programs have ready access to psychiatric, medical and laboratory services. This care approximates ASAM PPC-2 Level II.5 care.

Counseling / Therapy Services:

- Individual: 1 hour/week minimum
- Group: 8 hours/week minimum
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions: 3 hours/week minimum
- Family education and information sessions as clinically indicated

**CLINICALLY MANAGED LOW-INTENSITY RESIDENTIAL TREATMENT
HALFWAY HOUSE SUBSTANCE ABUSE TREATMENT
Level III.1**

Definition: Halfway House treatment is provided in a licensed residential facility which provides room, board, and services designed to apply recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the individual into work, education and family life. **This modality includes no less than 3 hours per week of counseling services.** A minimum of 7 hours per day of structured activities must be provided on each billable day. (Note: Self-help meetings may be included as part of structured activities) This care approximates ASAM PPC-2 Level III.1 care.

Medical Services: Must be provided as per licensing requirements.

Counseling /Therapy Services:

- Individual: 1 hour/week minimum
- Group: 3 hours/week minimum
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions: 3 hours/week minimum
- Family education and information sessions as clinically indicated

Structured Activities: 7 hours a day required. Example of activities:

- a. Counseling Services
- b. Psycho education
- c. Employment
- d. Vocational training
- e. Recovery Support Services
- f. Recreation

**CLINICALLY MANAGED HIGH-INTENSITY RESIDENTIAL TREATMENT
LONG TERM RESIDENTIAL/THERAPEUTIC COMMUNITY
SUBSTANCE ABUSE TREATMENT
Level III.5**

Definition: Long term residential substance abuse treatment or Therapeutic Community is provided in a licensed long term residential facility which provides a structured recovery environment, combined with professional clinical services, designed to address addiction and living skills problems for persons with substance abuse diagnosis who require longer treatment stays to support and promote recovery. Long Term Residential includes **no less than 8 hours per week of counseling interventions on at least five (5) separate occasions.** A minimum of 7 hours per day of structured activities must be provided on each billable day. (Note: Self-help meetings may be included as part of structured activities.) Intervention focuses on reintegration into the greater community with particular emphasis on education and vocational development. This care approximates ASAM PPC-2 Level III.5 care.

Medical Services: Must be provided as per licensing requirements.

Counseling/Therapy Services:

- Individual: 1 hour/week minimum
- Group: 5 hour week minimum
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions: 3 hours/week minimum
- Family Education and Information sessions as clinically indicated

Who provides the Counseling Services and Psychoeducation: LCADC, CADC or CADC Intern with the following Supervisor: (Per State Board of Marriage and Family Therapy Examiners Alcohol and Drug Counselor Committee 2004)

1. A New Jersey licensed clinical alcohol and drug counselor (LCADC);
2. A New Jersey licensed psychologist, clinical social worker(LCSW), marriage and family therapist(LMFT) or professional counselor (LPC) who is certified as a clinical supervisor (CCS) by the APCBNJ; and
3. A New Jersey licensed physician, who is certified by the American Society of Addiction Medicine (ASAM) or a psychiatrist with added qualification in chemical dependency from the American Psychiatric Association.

Structured Activities: 7 hours a day required. Example of activities:

- a. Counseling Services
- b. Psychoeducation
- c. Vocational training
- d. Recovery Support Services
- e. Recreation

**MEDICALLY MONITORED INTENSIVE INPATIENT TREATMENT
SHORT- TERM RESIDENTIAL SUBSTANCE ABUSE TREATMENT
Level III.7**

Definition: Short term residential substance abuse treatment is provided in a licensed short term residential facility which provides a highly structured recovery environment, combined with a commensurate level of professional clinical services, designed to address specific addiction and living skills problems for persons who are deemed amenable to intervention through short-term residential treatment. **Short Term Residential treatment must include no less than 12 hours per week of counseling services on at least 6 separate occasions.** A minimum of 7 hours of structured programming must be provided on a billable day until the person demonstrates specific treatment gains. (Note: Self-help meetings may be included as part of structured activities.) This care approximates ASAM PPC-2 Level III.7 care.

Medical Services: Must be provided as per licensing requirements.

Counseling / Therapy Services:

- Individual: 2 hour/week minimum
- Group: 10 hours/week minimum (4 sessions)
- Family: To be included during course of treatment as clinically indicated

Psychoeducation:

- Didactic sessions: 8 hours/week minimum
- Family Education and Information sessions as clinically indicated

Structured Activities: 7 hours a day required. Example of activities:

- a. Counseling Services
- b. Psychoeducation
- c. Vocational training
- d. Recovery Support Services
- e. Recreation

MEDICALLY MONITORED INPATIENT DETOXIFICATION Level III.7D

Definition: Medically Monitored Inpatient Detoxification is an organized service delivered by medical and nursing professionals, which provides 24-hour medically supervised evaluation and withdrawal management in a permanent facility with inpatient beds. Services are delivered under a defined set of physician-approved policies and physician monitored procedures for clinical protocols. This level provides care to patients whose withdrawal signs and symptoms are sufficiently severe to require 24-hour inpatient care. Detoxification includes 2 hours per week of counseling services. (Note: Self-help meetings may be included as part of structured activities) This care approximates ASAM PPC-2 Level III.7D care.

Medical Services: Must be provided in the facility under the supervision of a Medical Director. All other licensing requirements for medical services must be followed.

Counseling /Therapy Services:

- Individual: 2 hour/week minimum
- Group: 1 hours/week

OPIOID REPLACEMENT THERAPY – METHADONE TREATMENT

Description: Methadone is a synthetic opioid used medically as an analgesic, and as an anti-addictive medication for use in patients who meet criteria for opioid dependence. Methadone, used for maintenance and/or detoxification is a medication that is provided in combination with substance abuse counseling in a licensed substance abuse treatment facility that is; accredited by a recognized accreditation body, approved by SAMHSA, complies with all rules enforced by the Drug Enforcement Administration (DEA) and is licensed by the Division of Addiction Services.

Required Staff:

Medical Director: Licensed in the state of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required. **Nursing Director:** Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians, registered nurses, licensed practical nurses or pharmacists may dispense or administer medication in a facility providing opioid treatment services.

Required Medical Services:

- Full assessment with physical examination at admission and annually thereafter
- Regular urine drug screens
- Pregnancy screen at intake for women of child-bearing age
- Regular review of medication by physician and prescription adjustments as medically determined

Counseling Services: At minimum, methadone treatment delivered in a Licensed Methadone Treatment program must adhere to the counseling standards outlined in DAS licensure standards, 10:161B-11, which includes number and frequency of counseling sessions based on the criteria of the Phase System.

- Phase I- At least one counseling session per week
- Phase II- At least one counseling session every two weeks
- Phase III- At least one counseling session per month
- Phase IV- At least one counseling session every three months

Methadone can be administered in conjunction with other clinical services across all levels of care provided by a DAS licensed Substance Abuse treatment program. All counseling requirements must be in accordance with the licensing requirements for that level of care.

OPIOID REPLACEMENT THERAPY – SUBOXONE INDUCTION

Description: Suboxone (buprenorphine hydrochloride and naloxone hydrochloride) is used medically for the treatment of opioid dependence. Suboxone induction (usual duration approximately one week) involves helping a client begin the process of using suboxone to manage his or her opioid dependence. The goal of the induction phase is to find the minimum dose of suboxone at which the client discontinues or markedly diminishes use of other opioids and experiences no withdrawal symptoms, minimal or no side effects, and has no uncontrollable cravings for drugs of abuse.

In an accepted Clinical Pathway, Suboxone Induction is followed by either Suboxone Maintenance or Suboxone Detoxification for the treatment of Opioid Addiction.

Required Staff: Must be provided by a certified physician in Addiction Medicine who has satisfied qualifications set-forth by the provisions of the Drug Addiction Treatment Act of 2000 (DATA 2000) and the Office of National Drug Control Policy Reauthorization Act of 2006 (ONDCPRA).

When prescribed in a substance abuse treatment facility, the following requirements apply:

Medical Director: Licensed in the State of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required.

Nursing Director: Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians, registered nurses, licensed practical nurses or pharmacists may dispense or administer medication in a facility providing opioid treatment services

Required Medical Services: All physicians are referred to the federal guidelines established through the Center for Substance Abuse Treatment (CSAT) for the minimum requirements.

Clients must be instructed to abstain from the use of any opioids twelve hours prior to the induction phase of suboxone treatment.

During the induction and stabilization of suboxone therapy, medical care and consultation should be available on a 24-hour basis. This care should be supervised by the physician performing the initial induction.

Opioid dependent pregnant clients must receive proper education for the risks of suboxone treatment.

Counseling Services: Suboxone treatment should be administered in conjunction with other clinical services across all levels of care provided by a DAS licensed Substance Abuse treatment program. All counseling requirements must be in accordance with the licensing requirements for that level of care.

OPIOID REPLACEMENT THERAPY – SUBOXONE MAINTENANCE

Description: Buprenorphine, in the form of Subutex (buprenorphine hydrochloride) and Suboxone tablets (buprenorphine hydrochloride and naloxone hydrochloride), is used medically for the treatment of opioid dependence. Buprenorphine maintenance, following induction and stabilization requires maintaining buprenorphine at stable dosage levels for a period in excess of 21 days.

Required Staff: Must be provided by a certified physician in Addiction Medicine who has satisfied qualifications set-forth by the provisions of the Drug Addiction Treatment Act of 2000 (DATA 200) and the Office of National Drug Control Policy Reauthorization Act of 2006 (ONDCPRA).

When prescribed in a substance abuse treatment facility, the following requirements apply:

Medical Director: Licensed in the state of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required.

Nursing Director: Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians, registered nurses, licensed practical nurses or pharmacists may dispense or administer medication in a facility providing opioid treatment services

Required Medical Services:

Full assessment with physical examination at admission and annually thereafter;
Regular urine drug screens

Counseling Services: Suboxone treatment should be administered in conjunction with other clinical services across all levels of care provided by a DAS licensed Substance Abuse treatment program. All counseling requirements must be in accordance with the licensing requirements for that level of care.

OPIOID REPLACEMENT THERAPY – SUBOXONE DETOXIFICATION

Description: Suboxone is used medically for the treatment of opioid dependence. Suboxone can be used for the medically supervised withdrawal of clients from both self-administered opioids and from opioid agonist treatment with methadone. Suboxone is used for medically supervised withdrawal from opioids to provide a transition from the state of physical dependence on opioids to an opioid-free state, while minimizing withdrawal symptoms and avoiding side effects of suboxone. The goal of the service is to achieve a safe and comfortable withdrawal from mood altering drugs and to effectively facilitate the client's entry into ongoing treatment and recovery.

Required Staff: Must be provided by a certified physician in Addiction Medicine who has satisfied qualifications set-forth by the provisions of the Drug Addiction Treatment Act of 2000 (DATA 2000) and the Office of National Drug Control Policy Reauthorization Act of 2006 (ONDCPRA).

When prescribed in a substance abuse treatment facility, the following requirements apply:

Medical Director: Licensed in the state of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required.

Nursing Director: Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians, registered nurses, licensed practical nurses or pharmacists may dispense or administer medication in a facility providing opioid treatment services

Required Medical Services: All physicians are referred to the federal guidelines established through the Center for Substance Abuse Treatment (CSAT) for the minimum requirements.

During suboxone detoxification, medical care and consultation should be available on a 24-hour basis. This care should be supervised by the physician performing the detoxification protocol.

- Opioid dependent pregnant clients must receive proper education for the risks of suboxone detoxification.
- Pregnancy screen at intake for women of child-bearing age
- Clients must have 24 hour access to a nurse on call.

Counseling Services:

- A full assessment and physical examination upon admission which indicates that the client meets ASAM clinical criteria for outpatient detoxification (Level 0.5 – Level II).
- Patient must participate in concurrent Intensive Outpatient, Partial Care or Outpatient Counseling as determined by an ASAM Assessment and defined by DAS Service Descriptions.

Regardless of Level of Care, the client must be seen each day of the detoxification for, at minimum, a medical assessment.

METHADONE DETOXIFICATION

Description: Methadone is used medically for the treatment of opioid dependence. Methadone can be used for the medically supervised withdrawal from opioids to provide a transition from the state of physical dependence on opioids to an opioid-free state, while minimizing withdrawal symptoms and avoiding the side effects of methadone. The goal of this service is to achieve a safe and comfortable withdrawal from mood altering drugs and to effectively facilitate the patient's entry into ongoing treatment and recovery.

Required Staff: When prescribed in a substance abuse treatment facility, the following requirements apply:

Medical Director: Licensed in the state of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required.

Nursing Director: Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians, registered nurses, licensed practical nurses or pharmacists may dispense or administer medication in a facility providing opioid treatment services

Required Medical Services: All physicians are referred to the federal guidelines established through the Center for Substance Abuse Treatment (CSAT) for the minimum requirements.

- During methadone detoxification, medical care and consultation should be available on a 24-hour basis. This care should be supervised by the physician performing the detoxification protocol.
- Opioid dependent pregnant clients must receive proper education for the risks of methadone detoxification.
- Pregnancy test for all women
- Clients must have 24 hour access to a nurse on call.

Counseling Services:

- A full assessment and physical examination upon admission which indicates that the client meets ASAM clinical criteria for outpatient detoxification (Level 0.5 – Level II).
- Client must participate in concurrent Intensive Outpatient, Partial Care or Outpatient Counseling as determined by an ASAM Assessment and defined by DAS Service Descriptions.
- Regardless of Level of Care, the client must be seen each day of the detoxification for, at minimum, a medical assessment.

NALOXONE- EMERGENCY CARE

Description: Naloxone is a drug used to counter the effects of opioid overdose. Naloxone is specifically used to counteract life-threatening depression of the central nervous system and respiratory system. Naloxone is most commonly injected intravenously for fastest action. The drug acts after about two minutes, and its effects may last approximately 45 minutes in duration. Naloxone may also be administered via intramuscular or subcutaneous injection.

Required Staff:

Medical Director: Licensed in the state of New Jersey as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required.

Nursing Director: Registered Nurse (RN) currently licensed in New Jersey with one year of experience in Addictions treatment.

Only physicians may prescribe or dispense medication in a facility providing opioid treatment services. A physician or Registered Nurse must educate the client on the risks, benefits, alternatives, and proper use of the treatment prior to prescribing.

Required Medical Services: Although traditionally administered by emergency response personnel, naloxone can be administered by minimally trained laypeople, which makes it ideal for treating overdose in people who suffer the effects of an opioid overdose.

All clients' who are administered naloxone must be transported to the hospital following the injection. Clients who receive naloxone may re-experience depressed respiration or coma-like symptoms once the drug wears off.

Counseling Services: Naloxone should be administered in conjunction with other clinical services across all levels of care provided by a DAS licensed Substance Abuse treatment program. All counseling requirements must be in accordance with the licensing requirements for that level of care.